

Work Order ID 78676

\*78676\*

Page 1

January-12-12 10:54:09 AM

Item ID: D206-667-201



Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Crosstube Aft

Start Date: 12/01/2012 Start Qty: 1.00

\*1\*

Cust Item ID:

Required Date: 10/02/2012 Req'd Qty: 1.00

\*1\*

Customer:

Reference:

Approvals: Process Plan: M.C.J. Date: 12/01/12 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start \*NR1\*

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop \*NR2\*

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

|          |              |
|----------|--------------|
| Draw Nbr | Revision Nbr |
|----------|--------------|

|              |             |
|--------------|-------------|
| D206-667-241 | Rev C (DEO) |
|--------------|-------------|

|          |       |
|----------|-------|
| DSI 9471 | Rev A |
|----------|-------|

100

\*100\*

DC

Document Control

DOCUMENT CONTROL

0.00

Memo

0.00

Photocopy bluefile and create labels as per PPP D206-667-201 CHG004 51262/01

110

\*110\*

Packaging

Packaging

Packaging

Memo

0.00

0.00






MO

12/1/16

Dart Aerospace Ltd

| W/O: 78676 |      | WORK ORDER CHANGES |    |      |     |                                     |                          |
|------------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE       | STEP | PROCEDURE CHANGE   | By | Date | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|            |      |                    |    |      |     |                                     |                          |
|            |      |                    |    |      |     |                                     |                          |

Part No: D206-667-201 PAR #:   Fault Category: X - tube NCR: Yes No DQA:   Date: 12/2/8  
 Resolution: we as is Disposition: we as is QA: N/C Closed:   Date: 12/2/8

| NCR: 12-1180 |      | WORK ORDER NON-CONFORMANCE (NCR)                      |   |  |   |   |   |   |
|--------------|------|---|---|--|---|---|---|---|
| DATE         | STEP | Description of NC<br>Section A                        | Corrective Action Section B   |  |   | Verification<br>Section C   | Approval<br>Chief Eng   | Approval<br>QC Inspector  |
|              |      |   | Initial<br>Chief Eng  | Action Description<br>Chief Eng  | Sign &<br>Date  |   |   |   |
| 12.01.19     | 100  | Number of landing passes<br>is below drag requirement | <br>12.01.19<br>PS/042 | Acceptable.<br>ZUBB is a light aircraft with<br>no history of fatigue issues<br>with cross tubes | <br>12/1/19 | <br>12/1/19<br>PS/042 | <br>12.01.19<br>PS/042 | <br>12/1/19 |
|              |      |   |   |  |   |   |   |   |
|              |      |   |   |  |   |   |   |   |

NOTE: Date & initial all entries

Work Order ID 78676

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January-12-12 10:54:09 AM

Item ID: D206-667-201

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Item Name: Crosstube Aft

Stop \*NS2\*

Start Date: 12/01/2012 Start Qty: 1.00

\*1\*

Cust Item ID:

Required Date: 10/02/2012 Req'd Qty: 1.00

\*1\*

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start \*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop \*NR2\*

| Sequence ID/<br>Work Center ID | Operation<br>Description  | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|---|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 120                            | BENDING MACHINE - CROSSTUBES  | 0.00                 |         |        |              |               |               |                  |                |
| *120*                          |   |                      |         |        |              |               |               |                  |                |
| CNC Bend 2                     | Memo  | 0.00                 |         |        |              |               |               |                  |                |
| CNC Alpha 160 Bender           | Bend tube as per Dwg D206-667-241 using CNC bender program 206B-AF and Folio FT |                      |         |        |              |               |               |                  |                |
| 130                            | QC15- Crosstube Dimensional Check   | 0.00                 |         |        |              |               |               |                  |                |
| *130*                          |   |                      |         |        |              |               |               |                  |                |
| QC                             | Memo  | 0.00                 |         |        |              |               |               |                  |                |
| Quality Control                |   |                      |         |        |              |               |               |                  |                |

JW/mo

12-1-16

5/16/19

| W/O: |      | WORK ORDER CHANGES |    |      |     |                                     |                          |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE | STEP | PROCEDURE CHANGE   | By | Date | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|      |      |                    |    |      |     |                                     |                          |
|      |      |                    |    |      |     |                                     |                          |

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

| NCR: |      | WORK ORDER NON-CONFORMANCE (NCR) |                             |                                 |                |                           |                       |                          |
|------|------|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP | Description of NC<br>Section A   | Corrective Action Section B |                                 |                | Verification<br>Section C | Approval<br>Chief Eng | Approval<br>QC Inspector |
|      |      |                                  | Initial<br>Chief Eng        | Action Description<br>Chief Eng | Sign &<br>Date |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |

**NOTE:** Date & initial all entries

**Work Order ID 78676**

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Item ID: D206-667-201

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Item Name: Crosstube Aft

Stop **\*NS2\***

Start Date: 12/01/2012 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 10/02/2012 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

140

0.00

**\*140\***

Crosstubes

Crosstubes

Memo

0.00

1-Drill pilot holes (3/16") as per Dwg D206-667-241 using drill Jig DT8575 &amp; DT8576

2-Drill &amp; ream holes as per Dwg D206-667-241 using drill Jig DT8575 &amp; DT8576.

(DRILL 3 HOLES ON BOTH SIDES)

3-Flip tube and switch drilling Jigs from right to left, left to right. Locate tube using "T" pins off holes drilled in previous step.

4-Drill pilot holes (3/16") as per Dwg D206-667-241 using drill Jig DT8575 &amp; DT8576

5-Drill & ream holes as per Dwg D206-667-241 using drill Jig DT8575 & DT8576. Check dimensions between holes on all four sides to ensure proper alignment. Use DT8583 & 8584 SUPPORT Jigs.  
(DRILL 3 HOLES ON BOTH SIDES)

6-Drill rivet holes as per Dwg D206-667-241 using drill Jig DT8788

7-C'sink holes as per Dwg D206-667-241

8-Deburr &amp; Inspect for surface damage. Repair damage within limits as per Dwg D206-667-241

9-Scribe part # and batch # using vibrating stylus as per Dwg D206-667-241  
Inside of Cuff(Donot engrave on outside of tube)

TW

12-1-16

TW

12-1-16

| W/O: |      | WORK ORDER CHANGES |    |      |     |                                     |                          |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE | STEP | PROCEDURE CHANGE   | By | Date | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|      |      |                    |    |      |     |                                     |                          |
|      |      |                    |    |      |     |                                     |                          |

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

| NCR: |      | WORK ORDER NON-CONFORMANCE (NCR) |                             |                                 |                |                           |                       |                          |
|------|------|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP | Description of NC<br>Section A   | Corrective Action Section B |                                 |                | Verification<br>Section C | Approval<br>Chief Eng | Approval<br>QC Inspector |
|      |      |                                  | Initial<br>Chief Eng        | Action Description<br>Chief Eng | Sign &<br>Date |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |

**NOTE:** Date & initial all entries

# Work Order ID 78676

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January-12-12 10:54:09 AM

Item ID: D206-667-201 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Crosstube Aft  
 Start Date: 12/01/2012 Start Qty: 1.00 **\*1\*** Cust Item ID:  
 Required Date: 10/02/2012 Req'd Qty: 1.00 **\*1\*** Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

|                           |                                |      |  |  |  |  |  |  |  |
|---------------------------|--------------------------------|------|--|--|--|--|--|--|--|
| 150                       | Crosstubes Chemical Conversion | 0.00 |  |  |  |  |  |  |  |
| <b>*150*</b>              |                                |      |  |  |  |  |  |  |  |
| HandFXtube                | Memo                           | 0.00 |  |  |  |  |  |  |  |
| Hand Finishing Crosstubes |                                |      |  |  |  |  |  |  |  |

|                 |                          |      |  |  |  |  |  |  |  |
|-----------------|--------------------------|------|--|--|--|--|--|--|--|
| 160             | QC3- Inspect Part Finish | 0.00 |  |  |  |  |  |  |  |
| <b>*160*</b>    |                          |      |  |  |  |  |  |  |  |
| QC              | Memo                     | 0.00 |  |  |  |  |  |  |  |
| Quality Control |                          |      |  |  |  |  |  |  |  |

|                 |   |      |  |  |  |  |  |  |  |
|-----------------|---|------|--|--|--|--|--|--|--|
| 170             | QC5- Inspect part completeness to step on W/O | 0.00 |  |  |  |  |  |  |  |
| <b>*170*</b>    |   |      |  |  |  |  |  |  |  |
| QC              | Memo  | 0.00 |  |  |  |  |  |  |  |
| Quality Control |   |      |  |  |  |  |  |  |  |

**POSITIVE RECALL**

EFFECTIVE 12.01.16

RELEASED 12.01.19

AUTH 12.01.19

DATE 12.01.19

| W/O: |      | WORK ORDER CHANGES |    |      |     |                                     |                          |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE | STEP | PROCEDURE CHANGE   | By | Date | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|      |      |                    |    |      |     |                                     |                          |
|      |      |                    |    |      |     |                                     |                          |

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

| NCR: |      | WORK ORDER NON-CONFORMANCE (NCR) |                             |                                 |                |                           |                       |                          |
|------|------|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP | Description of NC<br>Section A   | Corrective Action Section B |                                 |                | Verification<br>Section C | Approval<br>Chief Eng | Approval<br>QC Inspector |
|      |      |                                  | Initial<br>Chief Eng        | Action Description<br>Chief Eng | Sign &<br>Date |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |

**NOTE:** Date & initial all entries



# Work Order ID 78676

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January-12-12 10:54:09 AM

Item ID: D206-667-201 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Crosstube Aft  
 Start Date: 12/01/2012 Start Qty: 1.00 **\*1\*** Cust Item ID:  
 Required Date: 10/02/2012 Req'd Qty: 1.00 **\*1\*** Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description  | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|---|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 180                            | Outsource process - NDT per QSI038 4.1                          | 0.00                 |         |        |              |               |               |                  |                |
| <b>*180*</b>                   |   |                      |         |        |              |               |               |                  |                |
| Outsource2                     | Memo  | 0.00                 |         |        |              |               |               |                  |                |
| Outsource process - NDT        | CROSSTUBES  |                      |         |        |              |               |               |                  |                |
|                                | 16542 PD 15924 LPI  |                      |         |        |              |               |               |                  |                |
|                                | Q6 per ASTM 1417 Level 2  |                      |         |        |              |               |               |                  |                |
| 190                            | Packaging   | 0.00                 |         |        |              |               |               |                  |                |
| <b>*190*</b>                   |   |                      |         |        |              |               |               |                  |                |
| Packaging                      | Memo  | 0.00                 |         |        |              |               |               |                  |                |
| Packaging                      | Ensure copy of NDT results attached to work order.              |                      |         |        |              |               |               |                  |                |
|                                |   |                      |         |        |              |               |               |                  |                |
| 200                            | QC6- Inspect dimensions to drawing                              | 0.00                 |         |        |              |               |               |                  |                |
| <b>*200*</b>                   |   |                      |         |        |              |               |               |                  |                |
| QC                             | Memo  | 0.00                 |         |        |              |               |               |                  |                |
| Quality Control                | Inspect for damage & ensure results are as per Dwg D206-667-201 |                      |         |        |              |               |               |                  |                |

12-01-18  
B/T 12-19

P10 →

44/01/18 U

12-01-18 (1)

5 n/a/17

Dart Aerospace Ltd

| WIO: 78676 |      | WORK ORDER CHANGES |    |      |     |                                     |                          |
|------------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE       | STEP | PROCEDURE CHANGE   | By | Date | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|            |      |                    |    |      |     |                                     |                          |
|            |      |                    |    |      |     |                                     |                          |

Part No: D706-667-201 PAR #:            Fault Category: landing gear / cross tubes NCR: Yes No            DQA:            Date: 12/2/3  
 Resolution: Re-work Disposition: Re-work QA: N/C Closed:            Date: 12/3/2

| NCR: 12-1181 |      | WORK ORDER NON-CONFORMANCE (NCR)                        |                             |   |  |   |                          |                          |
|--------------|------|---|-----------------------------|---|--|---|--------------------------|--------------------------|
| DATE         | STEP | Description of NC<br>Section A                          | Corrective Action Section B |   |  | Verification<br>Section C                       | Approval<br>Chief Eng    | Approval<br>QC Inspector |
|              |      |   | Initial<br>Chief Eng        | Action Description<br>Chief Eng                                     | Sign &<br>Date                         |   |                          |                          |
| 12/01/18     | #180 | Small indentation found at NDT inspection R.C. Process. | CP<br>12.01.19<br>PS/042    | → Grains out indentation<br>Re Aludin as per 252005<br>re NDT tube. | TH<br>12-1-18<br>AB<br>12-01-18<br>n/a | S<br>12/01/18<br>S<br>12/01/18<br>S<br>12/01/18 | CP<br>12.01.19<br>PS/042 | S<br>17/01/19            |
|              |      |   |                             |   |  |   |                          |                          |
|              |      |   |                             |   |  |   |                          |                          |

NOTE: Date & initial all entries

# Work Order ID 78676

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Item ID: D206-667-201 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Crosstube Aft  
 Start Date: 12/01/2012 Start Qty: 1.00 **\*1\*** Cust Item ID:  
 Required Date: 10/02/2012 Req'd Qty: 1.00 **\*1\*** Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description                                      | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|---|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 210                            | SprayPaint  | 0.00                 |         |        |              |               |               |                  |                |
| <b>*210*</b>                   |   |                      |         |        |              |               |               |                  |                |
| SprayPaint                     | Memo  | 0.00                 |         |        |              |               |               |                  |                |
| Spray Painting                 | 1-Mask Threaded holes   |                      |         |        |              |               |               |                  |                |
|                                | 2-Prime inside and outside crosstube as per QSI 005 4.2       |                      |         |        |              |               |               |                  |                |
|                                | 3-Paint outside crosstube with White Imron as per QSI 005 4.2 |                      |         |        |              |               |               |                  |                |
|                                | PRIME:  |                      |         |        |              |               |               |                  |                |
|                                | Start Time: <u>1:00</u>                                       |                      |         |        |              |               |               |                  |                |
|                                | Finish Time: <u>2:00</u>                                      |                      |         |        |              |               |               |                  |                |
|                                | PAINT:  |                      |         |        |              |               |               |                  |                |
|                                | Start Time: <u>6:00</u>                                       |                      |         |        |              |               |               |                  |                |
|                                | Finish Time: <u>7:00</u>                                      |                      |         |        |              |               |               |                  |                |
| 220                            | QC14- Inspect Spray Paint                                     | 0.00                 |         |        |              |               |               |                  |                |
| <b>*220*</b>                   |   |                      |         |        |              |               |               |                  |                |
| QC                             | Memo  | 0.00                 |         |        |              |               |               |                  |                |
| Quality Control                | Wrap in plastic bag to protect from scratches                 |                      |         |        |              |               |               |                  |                |

AS 12-1-19

12 '01 - 23 (1)

| W/O: |      | WORK ORDER CHANGES |    |      |     |                                     |                          |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE | STEP | PROCEDURE CHANGE   | By | Date | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|      |      |                    |    |      |     |                                     |                          |
|      |      |                    |    |      |     |                                     |                          |

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

| NCR: |      | WORK ORDER NON-CONFORMANCE (NCR) |                             |                                 |                |                           |                       |                          |
|------|------|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP | Description of NC<br>Section A   | Corrective Action Section B |                                 |                | Verification<br>Section C | Approval<br>Chief Eng | Approval<br>QC Inspector |
|      |      |                                  | Initial<br>Chief Eng        | Action Description<br>Chief Eng | Sign &<br>Date |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |

**NOTE:** Date & initial all entries

# Work Order ID 78676

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Item ID: D206-667-201 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Crosstube Aft  
 Start Date: 12/01/2012 Start Qty: 1.00 **\*1\*** Cust Item ID:  
 Required Date: 10/02/2012 Req'd Qty: 1.00 **\*1\*** Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description  | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|---|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 230                            | Crosstubes  | 0.00                 |         |        |              |               |               |                  |                |
| <b>*230*</b>                   |   |                      |         |        |              |               |               |                  |                |
| Crosstubes                     | Memo  | 0.00                 |         |        |              |               |               |                  |                |
| Crosstubes                     | 1-Abrade mating surfaces of support and crosstube with 400 grit sandpaper,<br>clean the area with 4105S wash 'n' wipe |                      |         |        |              |               |               |                  |                |
|                                | 2-Install supports with Proseal 890 per DS19565 and QSI 015<br>A/R Proseal 890 Batch: <u>120072</u>                   |                      |         |        |              |               |               |                  |                |
|                                | 3- Torque bolts as per dwg  |                      |         |        |              |               |               |                  |                |
| 240                            | QC5- Inspect part completeness to step on W/O   | 0.00                 |         |        |              |               |               |                  |                |
| <b>*240*</b>                   |   |                      |         |        |              |               |               |                  |                |
| QC                             | Memo  | 0.00                 |         |        |              |               |               |                  |                |
| Quality Control                |   |                      |         |        |              |               |               |                  |                |
| 250                            | Pick Kit  | 0.00                 |         |        |              |               |               |                  |                |
| <b>*250*</b>                   |   |                      |         |        |              |               |               |                  |                |
| Packaging                      | Memo  | 0.00                 |         |        |              |               |               |                  |                |
| Packaging                      |   |                      |         |        |              |               |               |                  |                |

A8 12-1-24

*[Signature]* 12-01-31 *[Signature]*

12/21, *[Signature]*

| W/O: |      | WORK ORDER CHANGES |    |      |     |                                     |                          |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE | STEP | PROCEDURE CHANGE   | By | Date | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|      |      |                    |    |      |     |                                     |                          |
|      |      |                    |    |      |     |                                     |                          |

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

| NCR: |      | WORK ORDER NON-CONFORMANCE (NCR) |                             |                                 |                |                           |                       |                          |
|------|------|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP | Description of NC<br>Section A   | Corrective Action Section B |                                 |                | Verification<br>Section C | Approval<br>Chief Eng | Approval<br>QC Inspector |
|      |      |                                  | Initial<br>Chief Eng        | Action Description<br>Chief Eng | Sign &<br>Date |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |

**NOTE:** Date & initial all entries

**Work Order ID 78676**

January-12-12 10:54:09 AM

**\*78676\***

Page 8

Item ID: D206-667-201

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Item Name: Crosstube Aft

Stop **\*NS2\***

Start Date: 12/01/2012 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 10/02/2012 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

260

QC4- 100% Inspect kits for completeness

0.00

**\*260\***

QC

Memo

0.00

*82102101*

Quality Control

270

Packaging

0.00

**\*270\***

Packaging

Memo

0.00

Packaging

Identify and pack for shipping as per PPPD206-667-201

Location: \_\_\_\_\_

PPP Rev: \_\_\_\_\_

*12/2/12*

280

QC21- Final Inspection - Work Order Release

0.00

**\*280\***

QC

Memo

0.00

Quality Control

*12/2/12**12-02-2*

| W/O: |      | WORK ORDER CHANGES |    |      |     |                                     |                          |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE | STEP | PROCEDURE CHANGE   | By | Date | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|      |      |                    |    |      |     |                                     |                          |
|      |      |                    |    |      |     |                                     |                          |

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

| NCR: |      | WORK ORDER NON-CONFORMANCE (NCR) |                             |                                 |                |                           |                       |                          |
|------|------|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP | Description of NC<br>Section A   | Corrective Action Section B |                                 |                | Verification<br>Section C | Approval<br>Chief Eng | Approval<br>QC Inspector |
|      |      |                                  | Initial<br>Chief Eng        | Action Description<br>Chief Eng | Sign &<br>Date |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |

**NOTE:** Date & initial all entries



# Picklist Print

January-12-12 10:54:15 AM

Page 1

Work Order ID: 78676

**\*78676\***

Parent Item: D206-667-201

**\*D206-667-201\***

Parent Item Name: Crosstube Aft

Start Date: 12/01/2012

Required Date: 10/02/2012

Start Qty: 1.00

Required Qty: 1.00

Comments:

IPP RevA: New issue DD verified by:EC  
11.08.08 PER ECN 11-615 DD VERF:EC

IPP REV:B

| Component Item ID/<br>Item Name | Replacement<br>Item ID | Mfg/<br>Purch | Bin<br>Item | Primary<br>Location | Last<br>Location | Route<br>Seq ID | Unit of<br>Measure | Qty on<br>Hand | Qty per Kit | Total<br>Qty | Qty<br>Issued | Date<br>Issued | Status |
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|

D206-667-201TRN

Manufactured

No

110

Each

2.0000

1

1

**\*D206-667-201TRN\***

**\*\***

Crosstube Turning Detail

Location

Loc Qty

Loc Code

LG

2

72974

1

72975

1

① MO 12/1/16

D2891-1

Manufactured

No

230

Each

40.0000

2

2

**\*D2891-1\***

**\*\***

2.25 Support

Location

Loc Qty

Loc Code

LG052

40

72822

20

75176

20

2 AS 12-1-24

D3595-063-395

Manufactured

No

230

Each

98.0000

4

4

**\*D3595-063-395\***

**\*\***

RUBBER CUSHION

Location

Loc Qty

Loc Code

MAT052

98

70975

21

74300

77

4 AS 12-1-24

| W/O: |      | WORK ORDER CHANGES |    |      |     |                                     |                          |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE | STEP | PROCEDURE CHANGE   | By | Date | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|      |      |                    |    |      |     |                                     |                          |
|      |      |                    |    |      |     |                                     |                          |

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

| NCR: |      | WORK ORDER NON-CONFORMANCE (NCR) |                             |                                 |                |                           |                       |                          |
|------|------|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP | Description of NC<br>Section A   | Corrective Action Section B |                                 |                | Verification<br>Section C | Approval<br>Chief Eng | Approval<br>QC Inspector |
|      |      |                                  | Initial<br>Chief Eng        | Action Description<br>Chief Eng | Sign &<br>Date |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
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**NOTE:** Date & initial all entries

# Picklist Print

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Page 2

Work Order ID: 78676

**\*78676\***

Parent Item: D206-667-201

**\*D206-667-201\***

Parent Item Name: Crosstube Aft

Start Date: 12/01/2012

Required Date: 10/02/2012

Start Qty: 1.00

Required Qty: 1.00

MS21920-20

Purchased

No

230

Each

60.0000

4

4

**\*MS21920-20\***

Clamp (per MIL-DTL-8783C)

\*\*

Location

Loc Qty

Loc Code

LG050

60

116799

10

119386

50

Purchased

No

250

Each

634.0000

10

10

\*\*

AR 12-1-24

AN5-10A

**\*AN5-10A\***

Bolt

Location

Loc Qty

Loc Code

ST337

634

118191

80

119547

454

119981

100

Purchased

No

250

Each

62.0000

10

10

\*\*

10  
12/12/12

AN5-30A

**\*AN5-30A\***

BOLT

Location

Loc Qty

Loc Code

ST339

62

117514

9

118451

3

118706

50

2

10

| W/O: |      | WORK ORDER CHANGES |    |      |     |                                     |                          |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE | STEP | PROCEDURE CHANGE   | By | Date | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|      |      |                    |    |      |     |                                     |                          |
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Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

| NCR: |      | WORK ORDER NON-CONFORMANCE (NCR) |                             |                                 |                |                           |                       |                          |
|------|------|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP | Description of NC<br>Section A   | Corrective Action Section B |                                 |                | Verification<br>Section C | Approval<br>Chief Eng | Approval<br>QC Inspector |
|      |      |                                  | Initial<br>Chief Eng        | Action Description<br>Chief Eng | Sign &<br>Date |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
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**NOTE:** Date & initial all entries

# Picklist Print

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Page 3

Work Order ID: 78676

\*78676\*

Parent Item: D206-667-201

\*D206-667-201\*

Parent Item Name: Crosstube Aft

Start Date: 12/01/2012

Required Date: 10/02/2012

Start Qty: 1.00

Required Qty: 1.00

|           |           |    |     |      |          |    |   |    |
|-----------|-----------|----|-----|------|----------|----|---|----|
| AN5-32A   | Purchased | No | 250 | Each | 215.0000 | 4  | 4 |    |
| *AN5-32A* |           |    |     |      |          | ** |   | sp |
| Bolt      |           |    |     |      |          |    |   |    |
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January-12-12 10:54:15 AM

Shop Packet Print

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| W/O: |      | WORK ORDER CHANGES |    |      |     |                                     |                          |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE | STEP | PROCEDURE CHANGE   | By | Date | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|      |      |                    |    |      |     |                                     |                          |
|      |      |                    |    |      |     |                                     |                          |

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

| NCR: |      | WORK ORDER NON-CONFORMANCE (NCR) |                             |                                 |                |                           |                       |                          |
|------|------|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP | Description of NC<br>Section A   | Corrective Action Section B |                                 |                | Verification<br>Section C | Approval<br>Chief Eng | Approval<br>QC Inspector |
|      |      |                                  | Initial<br>Chief Eng        | Action Description<br>Chief Eng | Sign &<br>Date |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |

**NOTE:** Date & initial all entries

# Picklist Print

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Work Order ID: 78676

**\*78676\***

Parent Item: D206-667-201

**\*D206-667-201\***

Parent Item Name: Crosstube Aft

Start Date: 12/01/2012

Required Date: 10/02/2012

Start Qty: 1.00

Required Qty: 1.00

MS21042L5

Purchased

No

250

Each

2,022.000

10

10

\*\*

*12/12/12*

**\*MS21042I 5\***

Nut

Location

Loc Qty

Loc Code

ST300

2022

116105

5

116548

43

117611

50

118179

424

119109

1500

*10*

| W/O: |      | WORK ORDER CHANGES |    |      |     |                                     |                          |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE | STEP | PROCEDURE CHANGE   | By | Date | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|      |      |                    |    |      |     |                                     |                          |
|      |      |                    |    |      |     |                                     |                          |

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

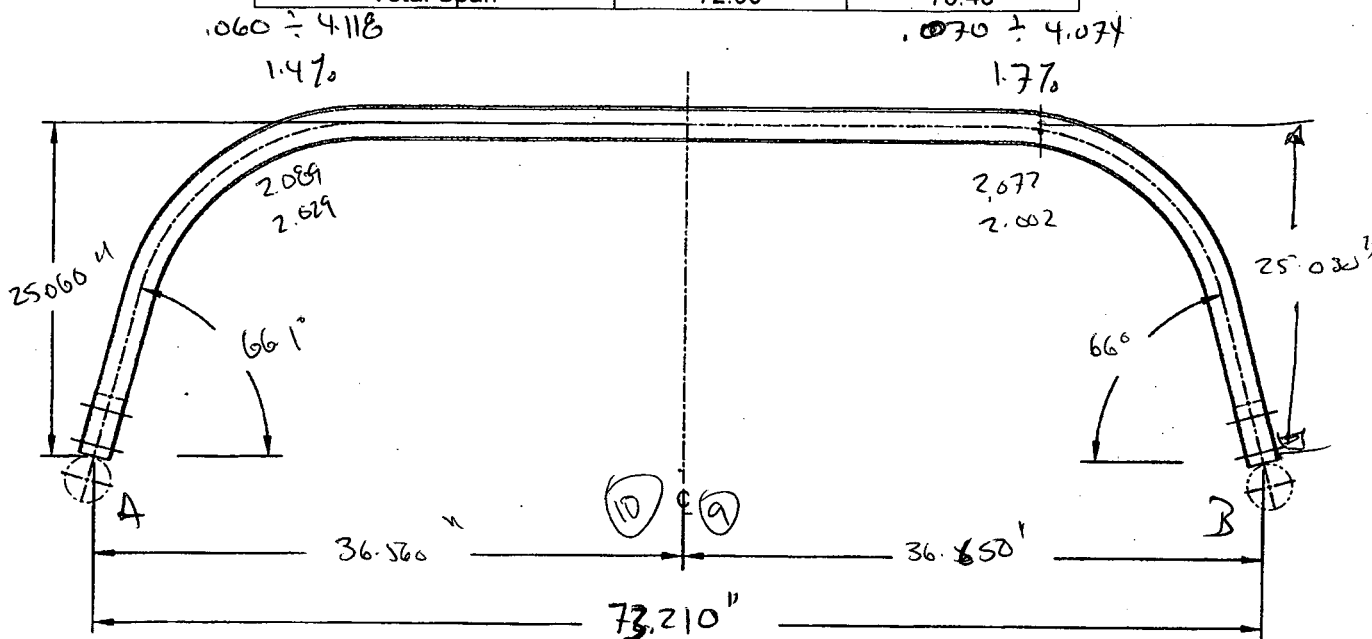
| NCR: |      | WORK ORDER NON-CONFORMANCE (NCR) |                             |                                 |                |                           |                       |                          |
|------|------|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP | Description of NC<br>Section A   | Corrective Action Section B |                                 |                | Verification<br>Section C | Approval<br>Chief Eng | Approval<br>QC Inspector |
|      |      |                                  | Initial<br>Chief Eng        | Action Description<br>Chief Eng | Sign &<br>Date |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |

**NOTE:** Date & initial all entries



|   |                                  |
|---|----------------------------------|
| <b>DART AEROSPACE LTD</b>                         | <b>Work Order:</b> 78676         |
| <b>Description:</b> Crosstube High Aft (206B)     | <b>Part Number:</b> D206-667-201 |
| <b>Inspection Dwg:</b> D206-667-241 <b>Rev:</b> C | <b>Page 1 of 1</b>               |

| Required Dimension | Min   | Max   |
|--------------------|-------|-------|
| Height             | 24.91 | 25.17 |
| 1/2 Span           | 36.47 | 36.73 |
| Angle              | 65    | 67    |
| Total Span         | 72.95 | 73.45 |



| Comments                             |
|--------------------------------------|
| Since A = $1.4\%$ crushy @ 10 Passes |
| Since B = $1.7\%$ crushy @ 9 Passes  |

|                 |          |
|-----------------|----------|
| QC15 Inspection | 12/14/15 |
| Date            |          |

| Rev | Date     | Change                           | Revised by | Approved |
|-----|----------|----------------------------------|------------|----------|
| A   | 07.02.06 | New Issue                        | KJ/JM      |          |
| B   | 07.12.04 | 24-98 was 24.48                  | KJ/JM      |          |
| C   | 11.10.12 | Dimensions updated per Dwg Rev C | KJ         |          |

| W/O: |      | WORK ORDER CHANGES |    |      |     |                                     |                          |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE | STEP | PROCEDURE CHANGE   | By | Date | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|      |      |                    |    |      |     |                                     |                          |
|      |      |                    |    |      |     |                                     |                          |

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

| NCR: |      | WORK ORDER NON-CONFORMANCE (NCR) |                             |                                 |                |                           |                       |                          |
|------|------|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP | Description of NC<br>Section A   | Corrective Action Section B |                                 |                | Verification<br>Section C | Approval<br>Chief Eng | Approval<br>QC Inspector |
|      |      |                                  | Initial<br>Chief Eng        | Action Description<br>Chief Eng | Sign &<br>Date |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |

**NOTE:** Date & initial all entries

| Item | Qty<br>-241 | Part Number    | Description   |
|------|-------------|----------------|---|
| 1    | X           | D206-667-241   | CROSSTUBE ASSEMBLY (206B HIGH AFT)  |
| 2    | 1           | D6003-102      | CROSSTUBE   |
| 3    | 2           | D2891-1        | SUPPORT   |
| 4    | 4           | D3595-063-395  | RUBBER CUSHION  |
| 5    | 4           | MS21920-20     | CLAMP (OR MS21920-21)   |
| 6    | A/R         | MAGNOBOND 6398 | ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE) |

# **GENERAL NOTES:**

- 1) MATERIAL: MANUFACTURED FROM D6003-102  
FINISHED LENGTH = 100.60±0.020
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
PAINT OUTSIDE PER DART QSI 005 4.2
- 3) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED.
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED.
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX.
- 6) IDENTIFICATION: SCRIBE DART PART NUMBER "D206-667-241" AND BATCH NUMBER ON INSIDE OF CUFF USING VIBRATING STYLUS.
- 7) WEIGHT: 22.5 lbs
- 8) PART IS SYMMETRIC ABOUT CENTERLINE.
- 9) RUN CUTTER OFF PART WHERE INDICATED. BLEND OUT EDGE LONGITUDINALLY, TRANSITION SHOULD BE SMOOTH.
- 10) BEND PROGRESSIVELY WITH A MINIMUM OF 12 PASSES. MAXIMUM TUBE FLATTENING DUE TO BENDING IS 6% BASED ON O.D.
- 11) LIQUID PENETRANT INSPECT OUTSIDE SURFACE OF CROSSTUBE PER QSI 038.
- 12) INSTALL D2891-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 13) INSTALL MS21920-20 CLAMPS (OR -21) WITH D3595-063-395 RUBBER CUSHIONS TO SECURE THE D2891-1 SUPPORT ON TOP SIDE OF THE CROSSTUBE. ENSURE CLAMPS MECHANISMS ARE LOCATED ON CROSSTUBE CLAMPS.
- 14) EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE. THE OUTSIDE SURFACE MUST BE SMOOTH AND FREE FROM SURFACE DEFECTS SUCH AS SCRATCHES, NICKS, OR DENTS. DEFECTS UP TO 0.005" MAY BE BLENDED OUT LONGITUDINALLY. CIRCUMFERENTIAL GRIND MARKS ARE UNACCEPTABLE.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS ARE SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

GROUP 1  
RETURN TO  
ENGINEERING  
UNCONTROLLED COPY  
SUBJECT TO AMENDMENT  
WITHOUT NOTICE  
WORK ORDER  
NO. 78676 M.L.J  
12/01/12

UNDER REVIEW  
*[Signature]* OK 11.02.13

RELEASED  
*[Signature]* 08/11/12  
DEO ATTACHED

|            |  |  |              |
|------------|--|--|--------------|
| C          | REFORMAT/REVISE GENERAL NOTES/PART LIST (ZN D7-1); REORGANIZED VIEWS AND REFORMATTED DRAWING TO CURRENT STANDARDS.<br>D3595-063-395 WAS D2856-400-694 (ZN D6-2 & A5-2); REMOVED REF. & ADD TOLERANCES (ZN C5-3, C4-3, D3-3); RELOCATED FLAG #6 (ZN A7-3) PER NCR 210; MOVED TURNING DETAIL & UPDATED TOLERANCE TO SHEET 4. | RF   | 08.11.06     |
| B          | ADD HOLES FOR COMPATABILITY WITH BHT/AA SKIDTUBES  | PH   | 05.02.04     |
| A          | NEW ISSUE  | CP   | 00.11.17     |
| REV.       | DESCRIPTION  | BY   | DATE         |
| DESIGN     | <i>[Signature]</i>   | <b>DART AEROSPACE LTD</b><br>HAWKESBURY, ONTARIO, CANADA |              |
| DRAWN      | RF   | DRAWING NO.  | REV. C       |
| CHECKED    | <i>[Signature]</i>   | D206-667-241   | SHEET 1 OF 4 |
| MFG. APPR. | <i>[Signature]</i>   | TITLE  | SCALE        |
| APPROVED   | <i>[Signature]</i>   | CROSSTUBE ASS'Y (206B HIGH AFT)                          | NTS          |
| DE APPR.   | <i>[Signature]</i>   | DATE 08.11.06  |              |

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| W/O: |      | WORK ORDER CHANGES |    |      |     |                                     |                          |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE | STEP | PROCEDURE CHANGE   | By | Date | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|      |      |                    |    |      |     |                                     |                          |
|      |      |                    |    |      |     |                                     |                          |

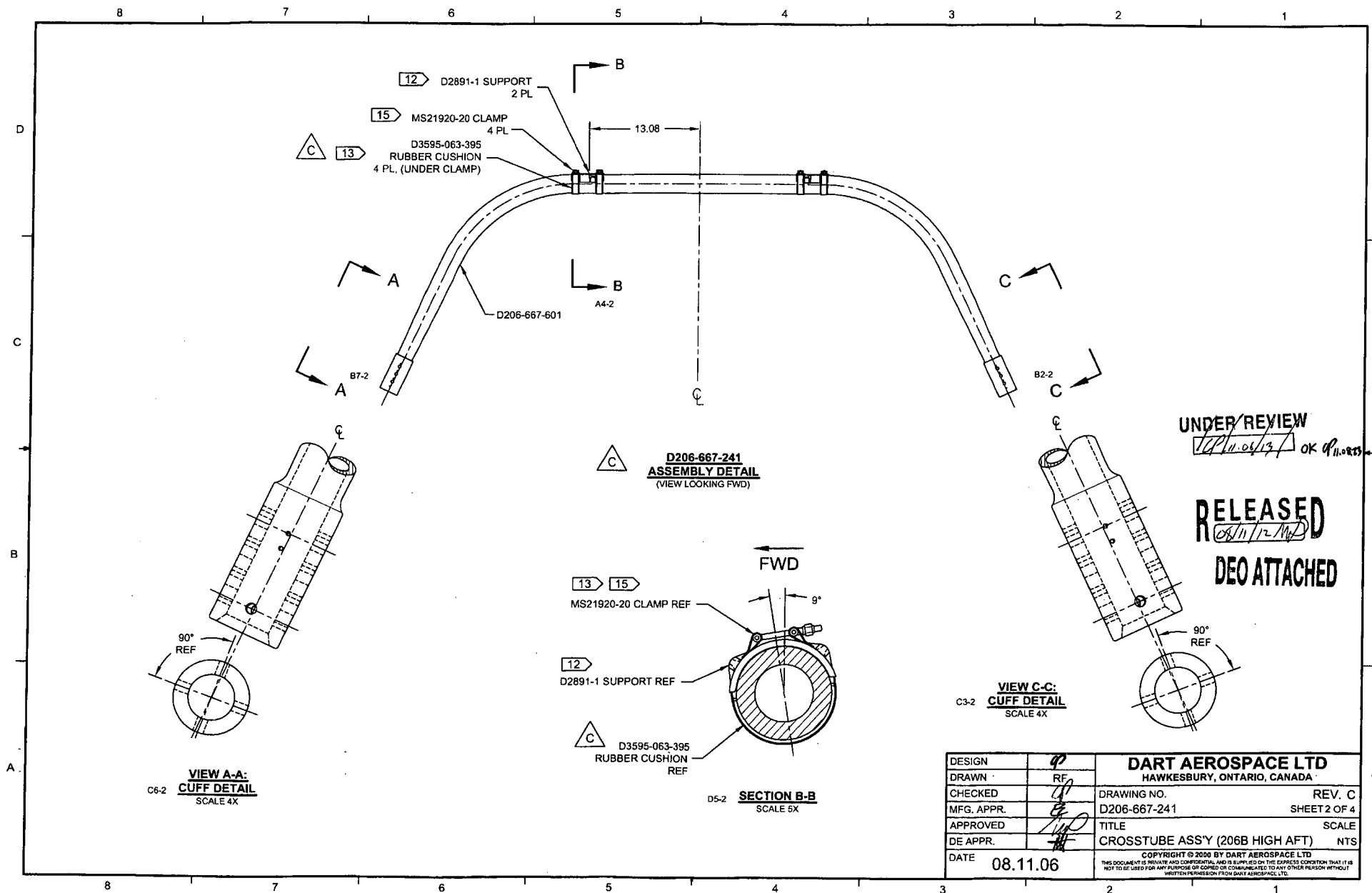
Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

| NCR: |      | WORK ORDER NON-CONFORMANCE (NCR) |                             |                                 |                |                           |                       |                          |
|------|------|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP | Description of NC<br>Section A   | Corrective Action Section B |                                 |                | Verification<br>Section C | Approval<br>Chief Eng | Approval<br>QC Inspector |
|      |      |                                  | Initial<br>Chief Eng        | Action Description<br>Chief Eng | Sign &<br>Date |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |

**NOTE:** Date & initial all entries

78676



UNDER REVIEW  
 08/11/13 OK 011003

RELEASED  
 08/11/12 MJD  
 DEO ATTACHED

|            |          |  |              |
|------------|----------|--|--------------|
| DESIGN     | 40       | <b>DART AEROSPACE LTD</b>  |              |
| DRAWN      | RF       | HAWKESBURY, ONTARIO, CANADA  |              |
| CHECKED    | 40       | DRAWING NO.  | REV. C       |
| MFG. APPR. | 40       | D206-667-241   | SHEET 2 OF 4 |
| APPROVED   | 40       | TITLE  | SCALE        |
| DE APPR.   | 40       | CROSSTUBE ASS'Y (206B HIGH AFT)  | NTS          |
| DATE       | 08.11.06 | COPYRIGHT © 2000 BY DART AEROSPACE LTD<br>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD. |              |

| W/O: |      | WORK ORDER CHANGES |    |      |     |                                     |                          |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE | STEP | PROCEDURE CHANGE   | By | Date | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|      |      |                    |    |      |     |                                     |                          |
|      |      |                    |    |      |     |                                     |                          |

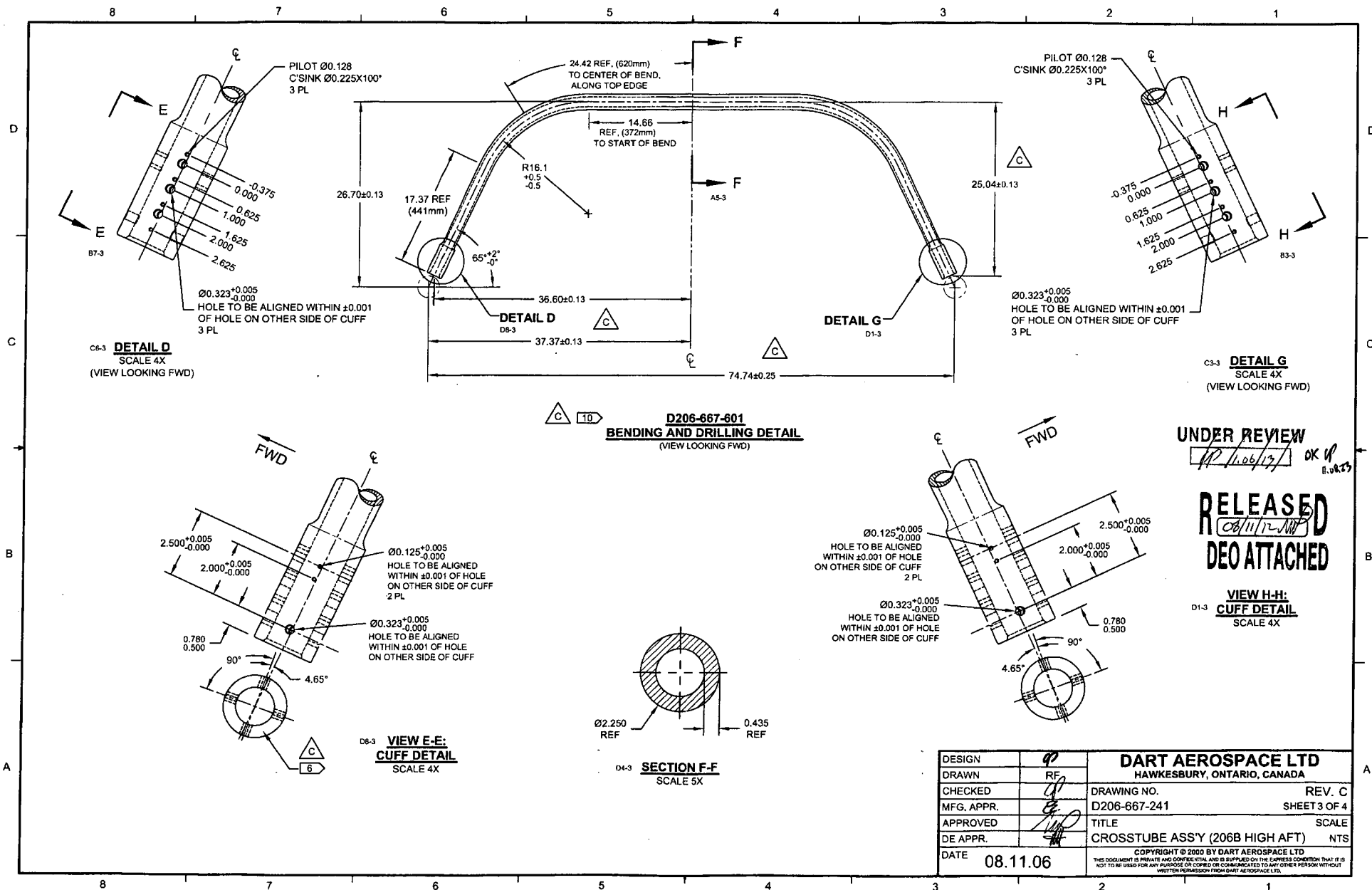
Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

| NCR: |      | WORK ORDER NON-CONFORMANCE (NCR) |                             |                                 |                |                           |                       |                          |
|------|------|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP | Description of NC<br>Section A   | Corrective Action Section B |                                 |                | Verification<br>Section C | Approval<br>Chief Eng | Approval<br>QC Inspector |
|      |      |                                  | Initial<br>Chief Eng        | Action Description<br>Chief Eng | Sign &<br>Date |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |

**NOTE:** Date & initial all entries

78676



UNDER REVIEW  
11/06/13 OK *RF*  
**RELEASED**  
**DEO ATTACHED**

| W/O: |      | WORK ORDER CHANGES |    |      |     |                                     |                          |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE | STEP | PROCEDURE CHANGE   | By | Date | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|      |      |                    |    |      |     |                                     |                          |
|      |      |                    |    |      |     |                                     |                          |

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

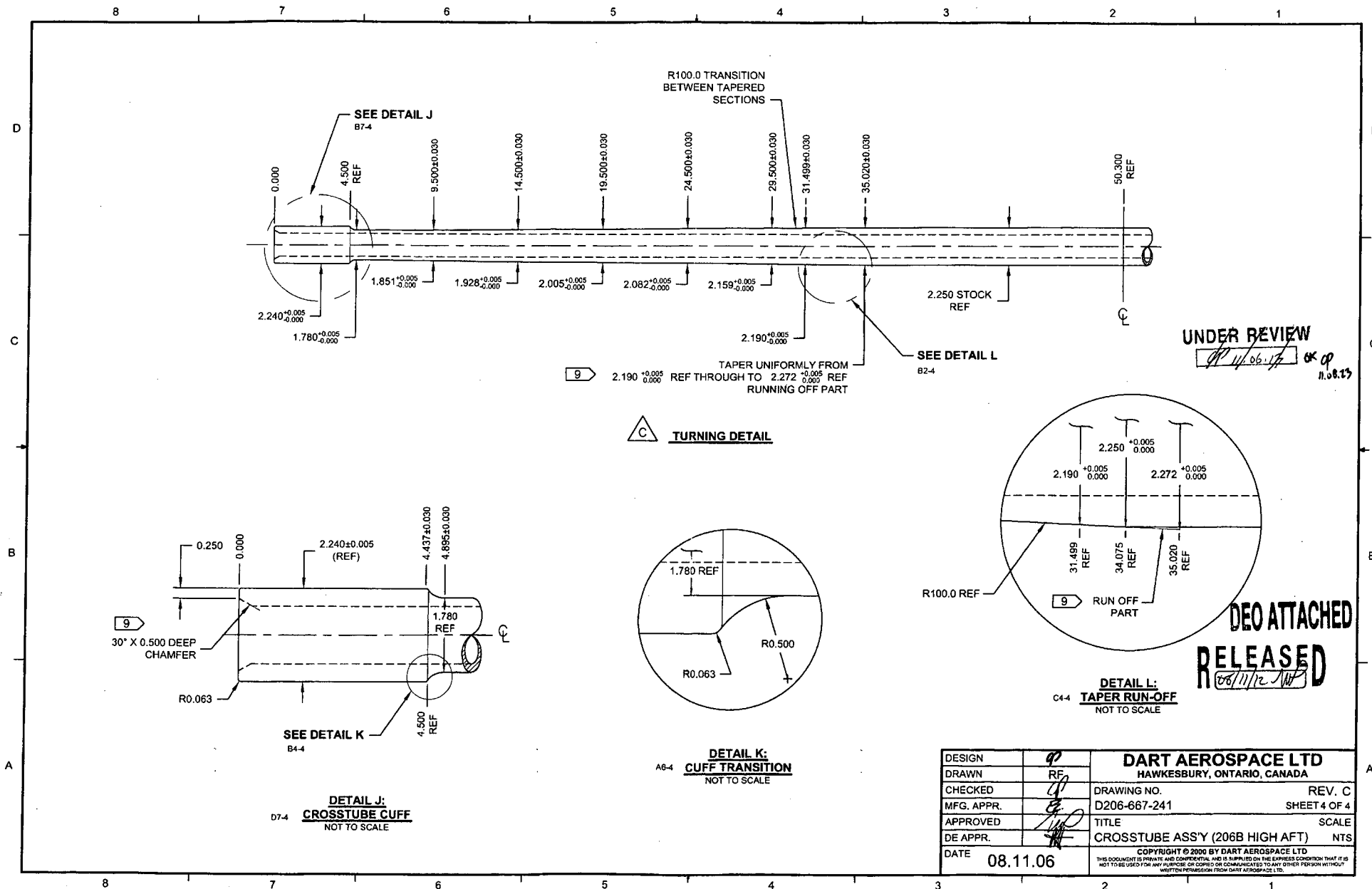
Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

| NCR: |      | WORK ORDER NON-CONFORMANCE (NCR) |                             |                                 |                |                           |                       |                          |
|------|------|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP | Description of NC<br>Section A   | Corrective Action Section B |                                 |                | Verification<br>Section C | Approval<br>Chief Eng | Approval<br>QC Inspector |
|      |      |                                  | Initial<br>Chief Eng        | Action Description<br>Chief Eng | Sign &<br>Date |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |

**NOTE:** Date & initial all entries



78676



| W/O: |      | WORK ORDER CHANGES |    |      |     |                                     |                          |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE | STEP | PROCEDURE CHANGE   | By | Date | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|      |      |                    |    |      |     |                                     |                          |
|      |      |                    |    |      |     |                                     |                          |

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

| NCR: |      | WORK ORDER NON-CONFORMANCE (NCR) |                             |                                 |                |                           |                       |                          |
|------|------|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP | Description of NC<br>Section A   | Corrective Action Section B |                                 |                | Verification<br>Section C | Approval<br>Chief Eng | Approval<br>QC Inspector |
|      |      |                                  | Initial<br>Chief Eng        | Action Description<br>Chief Eng | Sign &<br>Date |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |

**NOTE:** Date & initial all entries

78676

|                             |  |                  |   |                                |                           |              |
|-----------------------------|--|------------------|---|--------------------------------|---------------------------|--------------|
| DRAWING NO.<br>D206-667-241 | TITLE<br>CROSSTUBE ASS'Y (206B HIGH AFT) | REV. C           | <b>DART AEROSPACE LTD<br/>ENGINEERING ORDER</b> | D.E.O. NO.<br>D206-667-241-C-1 | SHEET NO.<br>SHEET 1 OF 1 | SCALE<br>NTS |
| DRAWN<br>97                 | CHECKED<br>AS                            | MFG. APPR.<br>M  | APPROVED<br>M                                   | DE APPR.<br>M                  |                           |              |
| DATE<br>11.07.15            | DATE<br>11.08.22                         | DATE<br>11.08.22 | DATE<br>11/08/22                                | DATE<br>11.08.22               |                           |              |

**PURPOSE:**

REPLACE MAGNOBOND WITH PROSEAL.

**CHANGE:**

**IS:**

| Item | Qty<br>-241 | Part Number     | Description                   |
|------|-------------|-----------------|-------------------------------|
| 6    | A/R         | PROSEAL 890 B-2 | SEALANT, AMS-S-8802 CLASS B-2 |

**WAS:**

|   |     |                |   |
|---|-----|----------------|---|
| 6 | A/R | MAGNOBOND 6398 | ROCKWELL SPECIFICATION RBO-120-023<br>ADHESIVE (TEXTRON/BELL SPEC. 299-947-100,<br>TYPE II, CLASS 2 ADHESIVE) |
|---|-----|----------------|---|

NOTE 12 & 15, SHEET 1 IS AMENDED AS FOLLOWS:

**IS:**

- 12) TO INSTALL D2891-1 SUPPORT: ABRASE MATING SURFACE OF SUPPORT AND CROSSTUBE WITH 180-GRIT SANDPAPER AND REMOVE RESIDUE WITH MEK (OR EQUIVALENT). APPLY A 0.04" TO 0.07" THICK LAYER OF PROSEAL 890 CLASS B-2 (OR AMS-S-8802 CLASS B-2) SEALANT TO MATING SURFACE OF SUPPORT.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING. **PRIOR TO PACKAGING, RE-CHECK TORQUE ON CLAMPS AFTER PROSEAL 890 SEALANT HAS CURED FOR 72 HOURS.**

**WAS:**

- 12) INSTALL D2891-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

RELEASED  
2011-08-23  
M

| W/O: |      | WORK ORDER CHANGES |    |      |     |                                     |                          |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE | STEP | PROCEDURE CHANGE   | By | Date | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|      |      |                    |    |      |     |                                     |                          |
|      |      |                    |    |      |     |                                     |                          |

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

| NCR: |      | WORK ORDER NON-CONFORMANCE (NCR) |                             |                                 |                |                           |                       |                          |
|------|------|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP | Description of NC<br>Section A   | Corrective Action Section B |                                 |                | Verification<br>Section C | Approval<br>Chief Eng | Approval<br>QC Inspector |
|      |      |                                  | Initial<br>Chief Eng        | Action Description<br>Chief Eng | Sign &<br>Date |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |
|      |      |                                  |                             |                                 |                |                           |                       |                          |

**NOTE:** Date & initial all entries



## LIQUID PENETRANT TEST REPORT

P- 12250

|                  |   |                 |                         |           |  |
|------------------|---|-----------------|-------------------------|-----------|--|
| CLIENT           | <u>DAT Aerospace</u>                                | DATE            | <u>JAN 18 2012</u>      | PAGE      | <u>1</u> OF <u>1</u>   |
| ATTENTION        | <u>CHANTEL</u>                                      | ACUREN JOB No.  | <u>188-12-C0010</u>     | TIME      | AM <input checked="" type="checkbox"/> PM <input type="checkbox"/> |
| ADDRESS          | <u>1270 ABERDEEN ST.</u><br><u>HAWKES BURY ONT.</u> | PO/NO No.       | <u>159267 -</u>         |           |  |
|                  |   | WORK LOCATION   | <u>SAME</u>             |           |  |
| PROJECT          | <u>F.P.E. on cross tubes.</u>                       | ACCEPTANCE STD. | <u>ASTM 1417/OSI-08</u> | REV./DATE | <u>2005</u>  |
| ITEM(S) EXAMINED | <u>(10) UNITS</u>                                   |                 |                         |           |  |

|                 |  |   |
|-----------------|--|---|
| JOB DESCRIPTION | PROCEDURE No. <u>LT-1002</u> REV./DATE <u>2008</u>   | TECHNIQUE No. <u>LT-1002</u> REV./DATE <u>2008</u>        |
| PART No.        | <u>SEE RESULTS</u>   | MATERIAL <u>ALUMINE ALUMINUM</u> THICKNESS <u>VARIOUS</u> |
| SCOPE           | <u>A WET FLOUORESCENT LIQUID PENETRANT INSPECTION</u><br><u>CARRIED OUT ON 100% EXTERNAL SURFACE</u> |   |

|                   |   |                                     |  |  |  |
|-------------------|---|-------------------------------------|--|--|--|
| TEST DETAILS      |   |                                     |  |  |  |
| METHOD            | <input checked="" type="checkbox"/> FLUORESCENT | <input type="checkbox"/> VISIBLE    | <input checked="" type="checkbox"/> WATER WASH | <input type="checkbox"/> SOLVENT REMOVABLE                           | <input type="checkbox"/> POST EMULSIFIED |
| FAMILY BRAND      | <u>24560 - MEGAFLOX</u>                         |                                     | BLACK LIGHT S/N <u>16459</u>                   | <input checked="" type="checkbox"/> OUTPUT > 1000 uW/cm <sup>2</sup> | <input type="checkbox"/> AMBIENT < 2 fc  |
| PENETRANT         | <u>2467</u>                                     | MINIMUM DWELL TIME <u>45</u> MIN.   | LIGHTING EQUIP.                                | <input type="checkbox"/> FLASHLIGHT                                  | <input type="checkbox"/> TROUBLELIGHT    |
| PENETRANT REMOVER | <u>120</u>                                      | MINIMUM DRY TIME <u>&gt;10</u> MIN. | OTHER  | <u>LABINO</u>  |  |
| DEVELOPER         | <u>SK052</u>                                    | MINIMUM DWELL TIME <u>10</u> MIN.   | LIGHT METER S/N <u>1098866</u>                 | CAL DUE DATE   | <u>FEB 2 2012</u>                        |
| DEVELOPER TYPE    | <input checked="" type="checkbox"/> NON AQUEOUS | <input type="checkbox"/> AQUEOUS    | <input type="checkbox"/> DRY                   |  |  |

|                     |  |  |  |  |  |
|---------------------|--|--|--|--|--|
| TEST SURFACE        |  |  |  |  |  |
| SURFACE CONDITION   | <input type="checkbox"/> AS GROUND     | <input type="checkbox"/> AS WELDED                 | <input checked="" type="checkbox"/> MACHINED       | <input type="checkbox"/> SHOT BLASTED  | <input checked="" type="checkbox"/> CLEAN BARE METAL |
| SURFACE TEMPERATURE | <input type="checkbox"/> < - 4°C/ 20°F | <input type="checkbox"/> - 4°C/ 20°F TO 10°C/ 50°F | <input type="checkbox"/> 10°C/ 50°F TO 52°C/ 125°F | <input type="checkbox"/> > 52°C/ 125°F |  |

|   |   |   |
|---|---|---|
| RESULTS- <input checked="" type="checkbox"/> METRIC <input type="checkbox"/> IMPERIAL | <p>1 - CROSS TUBE W.O. 78464 ✓<br/>1 - CROSS TUBE W.O. 78463 ✓<br/>1 - CROSS TUBE W.O. 75806 ✓<br/>1 - CROSS TUBE W.O. 75805 ✓<br/>1 - CROSS TUBE W.O. 78677 ✓<br/>1 - CROSS TUBE W.O. 78675 ✓<br/>1 - CROSS TUBE W.O. 78468 ✓<br/>1 - CROSS TUBE W.O. 78674 ✓<br/>1 - CROSS TUBE W.O. 78676 ✓<br/>1 - CROSS TUBE W.O. 78946 ✓<br/>206 UNITS 2012</p> | <p>← WAS REFOUND IN ONE AREA</p> <p><u>12 01 18</u></p> |
|---|---|---|

**Scope of Services**  
The agreement of Acuren Group Inc. to perform services extends only to those services provided for in writing. Under no circumstances shall such services extend beyond the performance of the requested services. It is expressly understood that all descriptions, comments and expressions of opinion reflect the opinions or observations of Acuren Group Inc. based on information and assumptions supplied by the owner/operator and are not intended nor can they be construed as representations or warranties. Acuren Group Inc. is not assuming any responsibilities of the owner/operator and the owner/operator retains complete responsibility for the engineering, manufacture, repair and use decisions as a result of the data or other information provided by Acuren Group Inc. In no event shall Acuren Group Inc.'s liability in respect of the services referred to herein exceed the amount paid for such services.

**Standard of Care**  
In performing the services provided, Acuren Group Inc. uses the degree, care and skill ordinarily exercised under similar circumstances by others performing such services in the same or similar locality. No other warranty, expressed or implied, is made or intended by Acuren Group Inc.

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|--|--|----------------------|
| SIGNATURES                               |  | DTR # <u>E-96923</u> |
| CLIENT REPRESENTATIVE                    | <u>Andrew Sheldon</u><br>PRINT SIGNATURE           | REPORT REVIEWED BY:  |
| TECHNICIAN (SIGNATURE):                  | <u>[Signature]</u>                                 | NAME INITIALS        |
| NAME (PRINT):                            | <u>Mike Johnston</u><br>1 <sup>st</sup> TECHNICIAN |                      |
| CGSB LEVEL <u>II</u> SNT LEVEL <u>II</u> | CGSB LEVEL <u>II</u> SNT LEVEL <u>II</u>           |                      |
| CGSB REG. No <u>6606</u>                 | CGSB REG. No <u>6606</u>                           |                      |